

# EXHIBIT 20

Participant must provide all of the information below in English:

1. Participant's contact information, including email address, and that of its counsel, if any:

Participant's Name: LUZ E MONTANEZ FONTANEZ  
Participant's Address: BADA SANTA CATALINA, H-C-01 BUZON 6453  
ARROYO PR 00714  
Participant's Email Address: luzmontanez69@gmail.com  
Name of Counsel: \_\_\_\_\_  
Address of Counsel: \_\_\_\_\_  
Email Address of Counsel: \_\_\_\_\_

2. Participant's Claim number and the nature of Participant's Claim:

Claim Number: 172061  
Nature of Claim: claim of funds due  
By: Luz E Montanez Fontanez  
Signature  
Luz Montanez Fontanez  
Print Name

\_\_\_\_\_  
Title (if Participant is not an individual)

9-2-21  
Date

**Instructions for Filing Notice of Participation:** If you are represented by counsel, this Notice must be filed electronically with the Court on the docket using the CM/ECF docket event Notice of Intent to Participate in Discovery for Commonwealth Plan Confirmation, in *In re Commonwealth of Puerto Rico*, Case No. 17 BK 3283-LTS, through the Court's case filing system on or before the applicable deadline. If you are not represented by counsel, you may instead mail this Notice to the Court's Clerk's Office at: United States District Court, Clerk's Office, 150 Ave. Carlos Chardon Ste. 150, San Juan, P.R. 00918-1767.

LUZ E MONTANEZ FONTANEZ

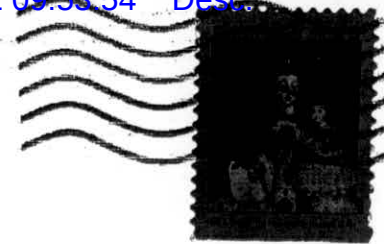
Case:17-03283-LTS Doc#:18368-19 Filed:10/03/21 Entered:10/03/21 09:53:54 Desc:

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Bada Santa catalina  
H-C-01 Buzon 6453  
Arroyo PR 00714



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